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			· · · · · · · · · · · · · · · · · · ·	Application Number :	iling Date
	CL	AIMS ONLY		101/38 43 6	iling Date
				Applicant(s)	
	CLAIMS AS F	ILED AFTER FIRST AMENDMENT	AFTER SECOND AMENDMENT	* May be used for additional claims or a	mendments *,
	Indep	Depend Indep Depend	AMENDMENT Indep Depend	Indep Depend Inde	p Depend Indep Depend
	2 3			52 53	
	5			54 55 56	
	7 8			57 58 59	
	10			60	
	12			62 63 64	
	16			65 66 67	
	17 18			68	
	20 21 22			70 71 72	
	23 24			73 74 75	
	25 26 27			76 77	
	28 29 30			78 79 80	
	31 32 33			81 82 83	
	34 35			84 85 86	
•	36 37 38			87	
	39 40 41			89 90 91	
•	42			92 93 94	
	44 45 46			95 96	
	47. 48 49			97 98 99	
·,	50 Total			Total Indep	
	Indep Total Depend			Total Depend	4
	Total Claims			Total Claims	
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